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022888 7590 10/07/2004

BEVER HOFFMAN & HARMS, LLP
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Patricia F. Tate	(Depositor's name)
<i>Patricia F. Tate</i>	(Signature)
December 30, 2004	(Date)

01/06/2005 MBEYENE2 00000073 10083932

01 FC:2501 700.00 DP
 02 FC:1504 300.00 DP

03 10/08/2004	APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/083,932	02/26/2002	Richard L. Gray	AME-001	8342	

TITLE OF INVENTION: SYSTEM AND METHOD FOR POWERING COLD CATHODE FLUORESCENT LIGHTING

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	-\$685- \$700.00	\$300	-\$985- \$1,000.00	01/07/2005
EXAMINER	ART UNIT	CLASS-SUBCLASS			
ALEMU, EPHREM	2821	315-291000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Bever, Hoffman &
2. Harms, LLP
3. Jeanette S. Harms

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Analog Microelectronics, Inc.

Santa Clara, CA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies 2

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- ☐ A check in the amount of the fee(s) is enclosed.
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- ☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0574 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☒ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date 12-30-04Typed or printed name Jeanette S. HarmsRegistration No. 35,537

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